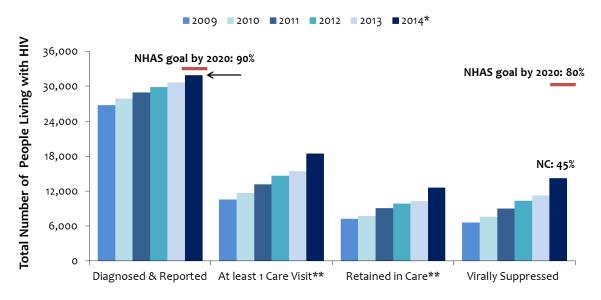


HIV Continuum of Care in North Carolina Reported HIV Case Data, 2014



Viral suppression has increased among the HIV community in care

HIV Continuum of Care in North Carolina, Evaluation Years 2009-2014



^{*}Data for 2014 are provisional only and should be interpreted with extra caution because they were calculated only six months after the end of the evaluation year, which is six to 12 months prior to the full time CDC recommends before calculation.

**At least 1 care visit in a given year; Retained in care is defined as having 2 or more care visits at least 3 months apart in a given year.

 $Legend: year shown refers to the year in which care \, measures \, were \, evaluated; cases \, were \, diagnosed \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, reported \, between the \, beginning \, of \, the \, epidemic \, and \, th$ the end of the prior year. For example, the data labeled "2014" represent all cases diagnosed and reported through 12/31/2013, and had care visits or were virally suppressed during calendar year 2014.

Understanding North Carolina's HIV Continuum of Care

The HIV continuum of care is a set of measurements developed within the past few years that describes engagement in HIV Care (Gardner et al. 2011).

- Measures are derived from surveillance data using reported laboratory results;
- Calculated based on the number of people with last known residence as North Carolina, regardless of where they were initially diagnosed with HIV; and
- Data for 2014 are provisional only and should be interpreted with extra caution because they were calculated six to 12 months prior to the full follow-up time recommended by the CDC.

Continuum of Care Key Results

- The estimated total number of people living in North Carolina with HIV infection is 35,600. Nearly 89% of the estimated total number of people living in North Carolina were diagnosed and reported with HIV through December 31, 2013, while the remaining 11% were unaware they are HIV-positive.
- Among cases diagnosed and reported through December 31, 2013 (evaluated in 2014), viral suppression was documented for an estimated 45% of the total cases. In states with complete reporting, 50% of people with HIV are virally suppressed (CDC 2014). In North Carolina, reporting is incomplete, so 45% is likely an underestimate of the true viral suppression.

Want More Information?

HIV/STD Facts and Figures web site: http:// epi.publichealth.nc.go v/cd/stds/figures.html

Centers for Disease Control and Prevention (CDC) Information on HIV **Continuum:** http://www.cdc.gov/

mmwr/preview/ mmwrhtml/ mm6347a5.htm

http://www.cdc.gov/ hiv/pdf/ dhap continuum.pdf

Contact Us

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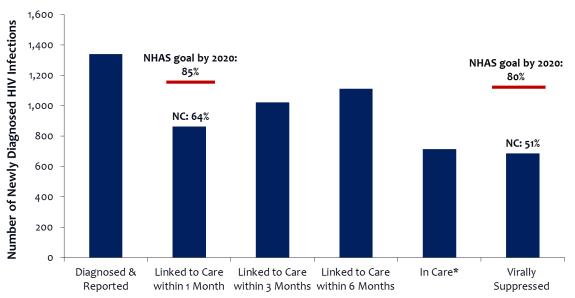


HIV Continuum of Care in North Carolina Reported HIV Case Data, 2014



The majority of newly diagnosed HIV infections are being linked to care within 6 months of diagnosis

2013 Newly Diagnosed HIV Infections Linkage, Retention, and Viral Suppression



^{*}At least one additional lab after the initial HIV diagnostic lab.

2013 North Carolina Newly Diagnosed HIV Infections Key Results

- 64% were linked to care within 1 month;
- 76% were linked to care within 3 months;
- 83% were linked to care within 6 months;
- 53% were retained in care (at least one additional lab after their initial HIV diagnosis); and
- 51% were virally suppressed (viral load tests less than 200 copies/mL).

What is being done to link and re-engage people in HIV care?

 State bridge counselors and regional retention staff actively look for people who have been identified as out of care and offer assistance in addressing barriers to care to facilitate re-engagement into care.

Viral suppression among other North Carolina programs

- 72% of Ryan White Part B clients were virally suppressed (2014-2015 Ryan White year)
- 77% of clients receiving AIDS Drug Assistance Program (ADAP) benefits were virally suppressed (2014-2015 Ryan White year)

HIV Continuum of Care Limitations

- North Carolina law did not require laboratory reporting of all CD4+ T-lymphocyte cell count and viral load laboratory tests until halfway through 2013.
- Consequently, all measures of care are underestimates of what would be observed if North Carolina had full laboratory reporting during the entire evaluation period.

National HIV/AIDS Strategy (NHAS) for the US 2020 Goals:

- Increasing number of HIV-positive individuals aware of their status to 90%
- Increase the proportion of newly diagnosed individuals who are linked to care within 1 month to 85%
- Increase proportion of all HIV-diagnosed individuals whose virus is effectively suppressed to 80%

Data Source:

enhanced HIV/AIDS Reporting System (eHARS) (data as of June 25, 2015).

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